

February 10, 2014

Coordinated Care Initiative (CCI) BASICS: Preparing for Changes

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National Senior Citizens Law Center



The National Senior Citizens Law Center is a non-profit organization whose principal mission is to protect the rights of low-income older adults. Through advocacy, litigation, and the education and counseling of local advocates, we seek to ensure the health and economic security of those with limited income and resources, and access to the courts for all. For more information, visit our Web site at www.NSCLC.org.

Coordinated Care Initiative: In a Nutshell

What

- Mandatory Medi-Cal for all SPDs
- LTSS Integration
- Medicare Integration

Who

- Dual eligibles
- Medi-Cal only SPDs

Where

- 8 counties: Alameda, Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo, Santa Clara*

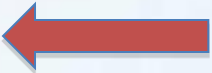
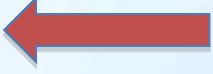
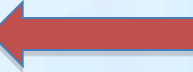
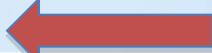
When

- April 1, 2014*

Why

- Coordinate Care
- Save Money

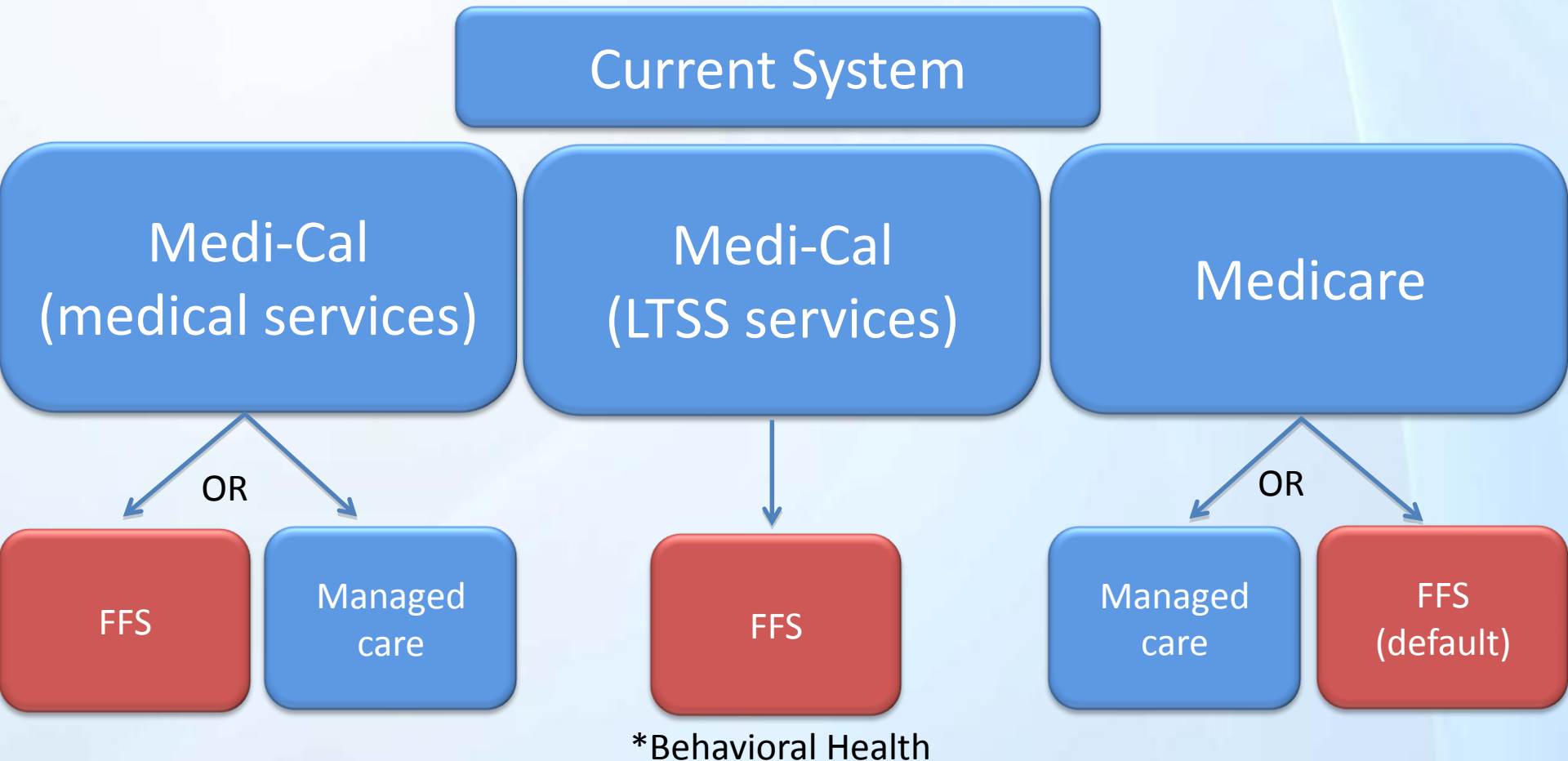
Glossary

- Coordinated Care Initiative (CCI)
 - Cal MediConnect
- Dual Eligible (Dual) 
- Duals-Special Needs Plan (D-SNP) 
- Fee-for-Service (FFS)
- Long Term Services and Supports (LTSS) 
 - In-Home Supportive Services (IHSS), Community Based Adult Services (CBAS), Multipurpose Senior Services Program (MSSP), Nursing Facility
- Medi-Cal Managed Care
- Program of All-Inclusive Care for the Elderly (PACE)
- Seniors and Persons with Disabilities (SPDs) 

CCI = three big changes

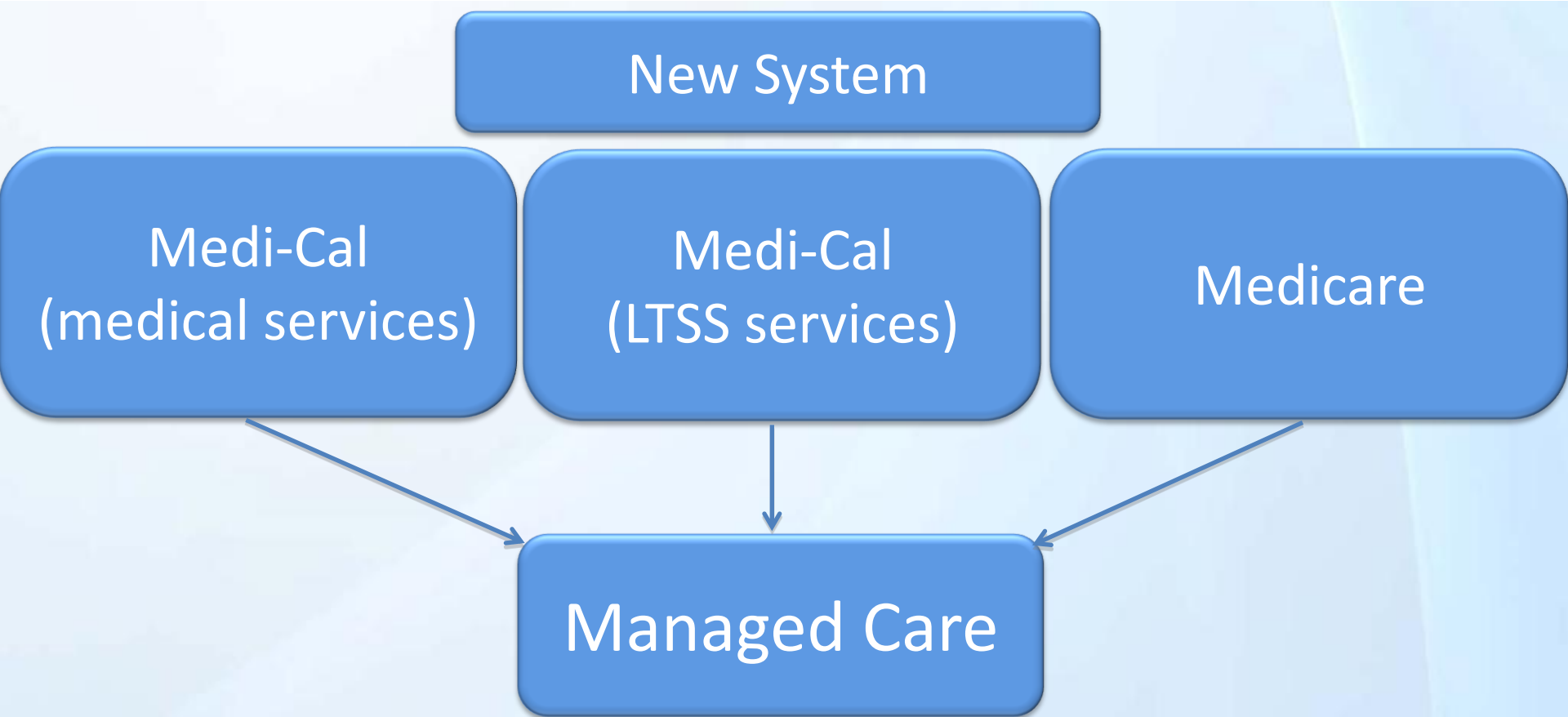
CCI Change	Description	Federal Approval
Mandatory Medi-Cal Managed Care	Duals and previously excluded SPDs must enroll in Medi-Cal Managed Care	Pending
LTSS Integration	LTSS added to Medi-Cal Managed Care plan benefit package	Pending
Medicare Integration (Cal MediConnect)	For duals, integration of Medicare and Medi-Cal benefits into one managed care plan.	Approved

The current Medi-Cal, LTSS, and Medicare delivery systems are different



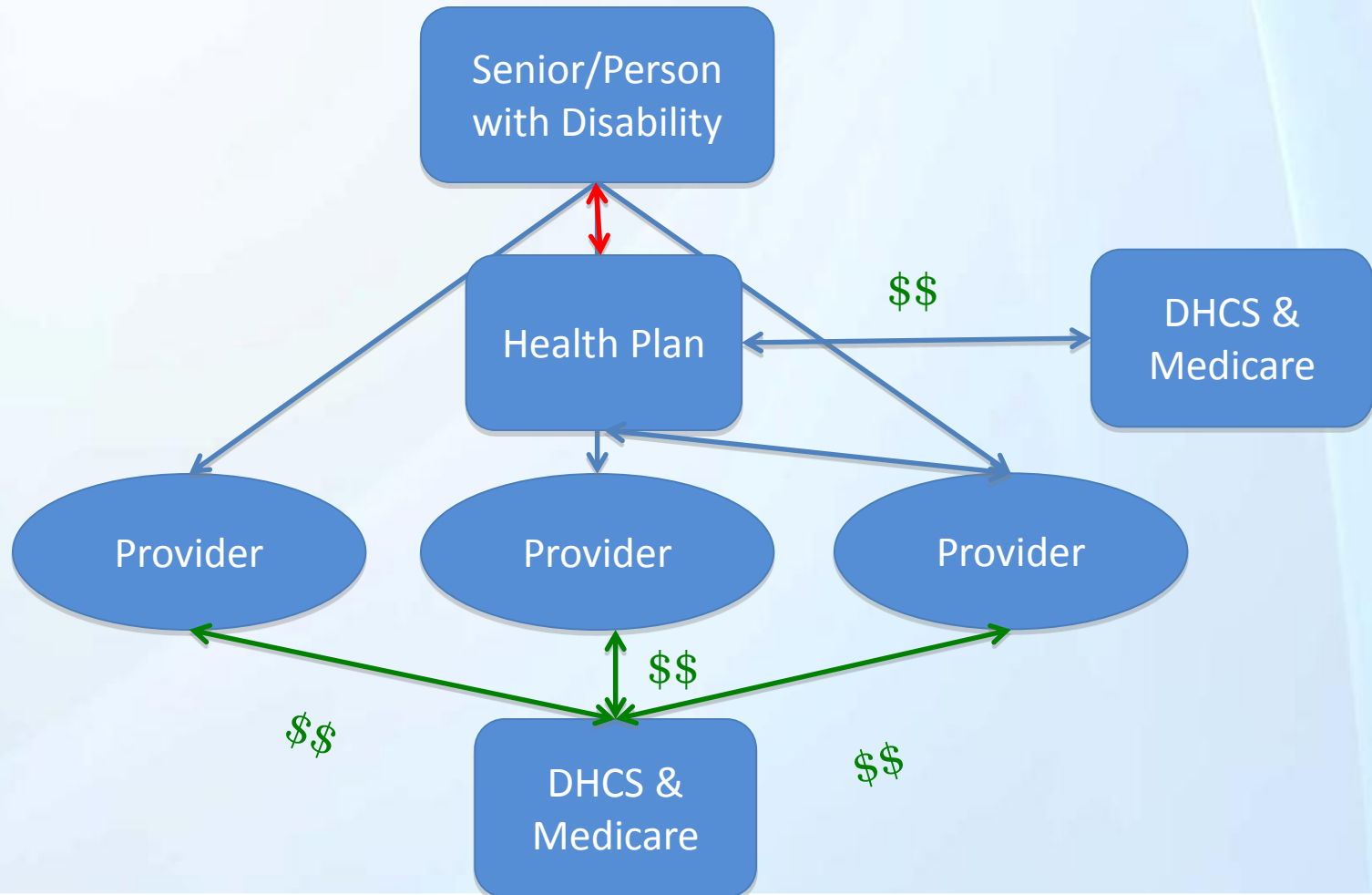
CCI moves services into managed care

What

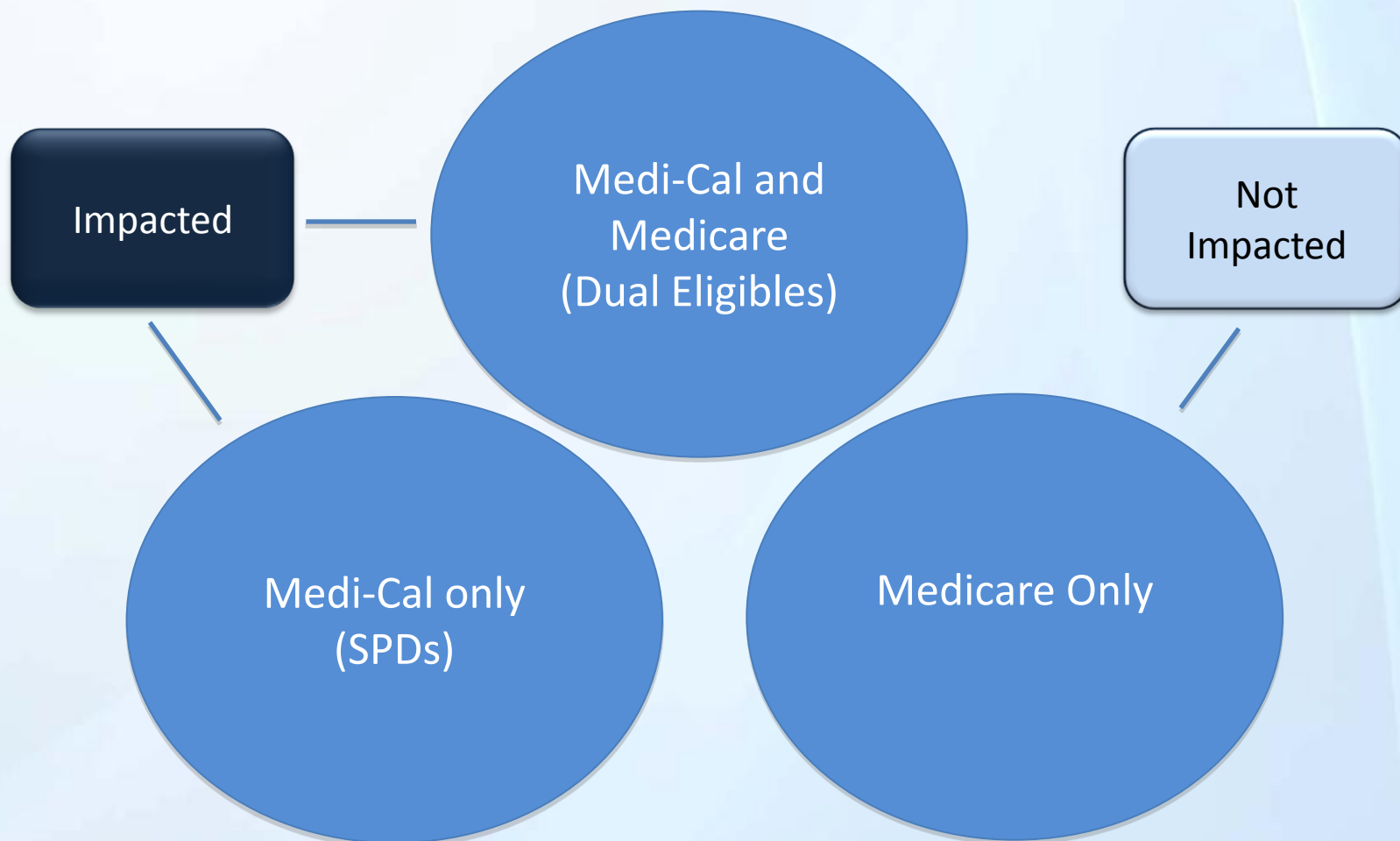


*Behavioral Health

Managed Care: Plans paid to provide covered services via network providers



CCI impacts duals & seniors and persons with disabilities with Medi-Cal



Different groups of duals and SPDs are affected differently

Who

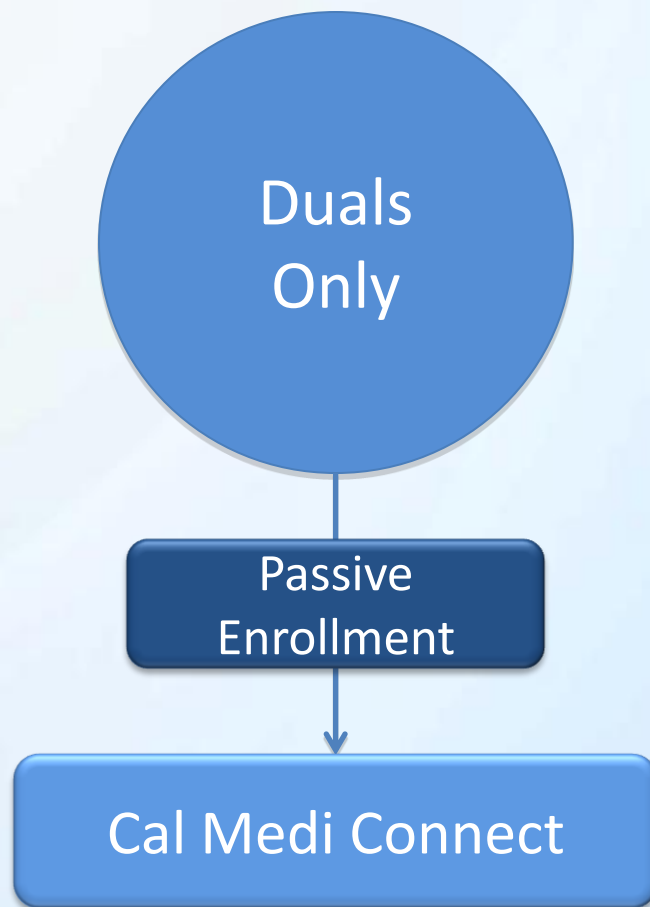
- SPDs who are already required to enroll in Medi-Cal managed care
- SPDs who will remain exempt from mandatory Medi-Cal managed care enrollment
- Dual eligibles who will be passively enrolled into Cal MediConnect
- Dual eligibles who can enroll into Cal MediConnect, but will not be passively enrolled
- Dual eligibles who cannot enroll in Cal MediConnect

Total Impact: 1,206,000

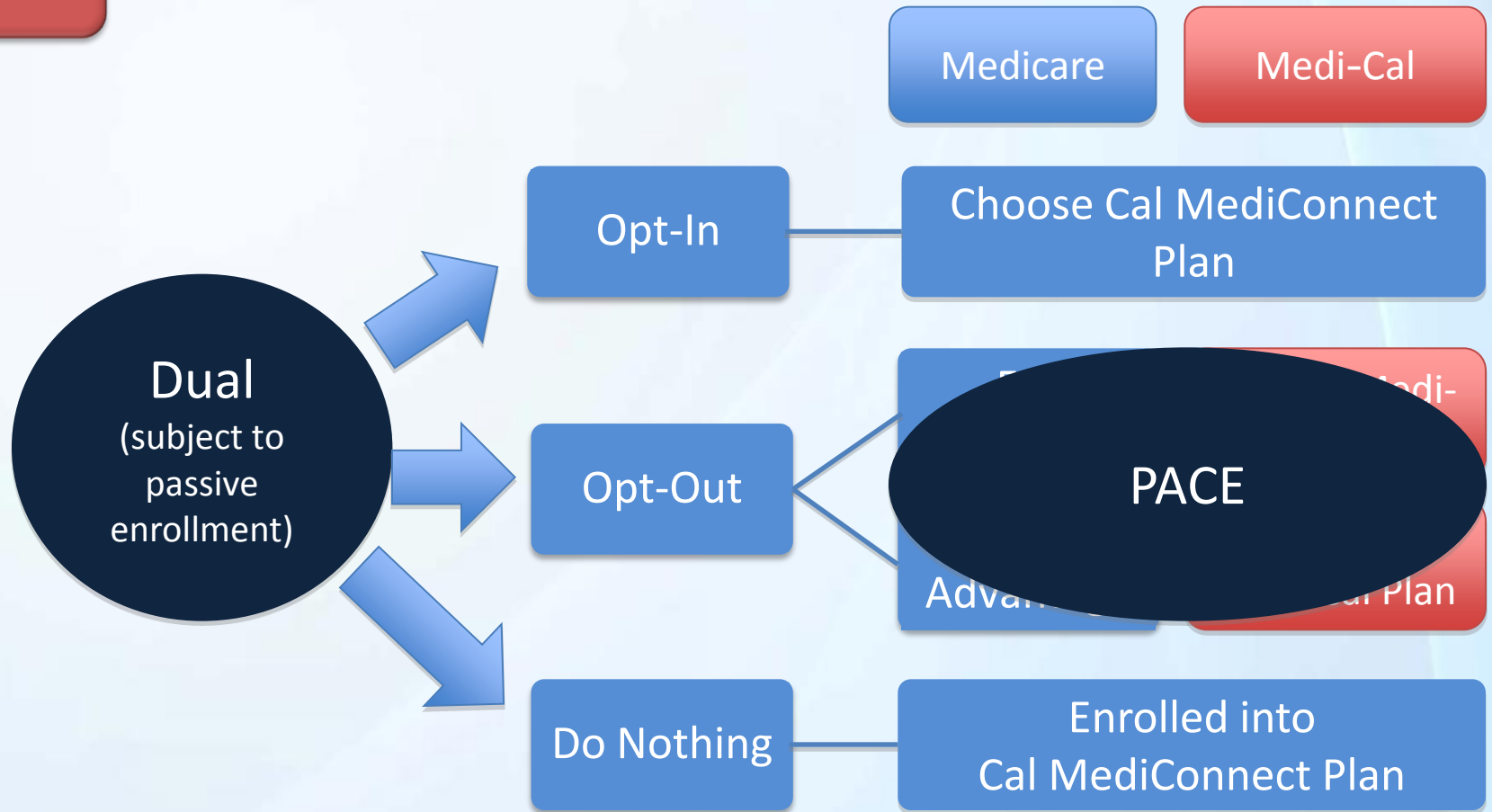
County	Duals Subject to Passive Enrollment in Cal MediConnect	Medi-Cal MC Only
Alameda	32,533	48,000
Los Angeles	288,399 (200,000 cap)	317,000
<i>Orange*</i>	65,537	51,000
Riverside	40,040	46,000
San Bernardino	41, 930	54,000
San Diego	55,798	64,000
San Mateo	12 371	14,000
Santa Clara	37, 739	38,000
Totals	574, 347 (485,948 with cap)	632,000

Only Duals can enroll in Cal MediConnect

What

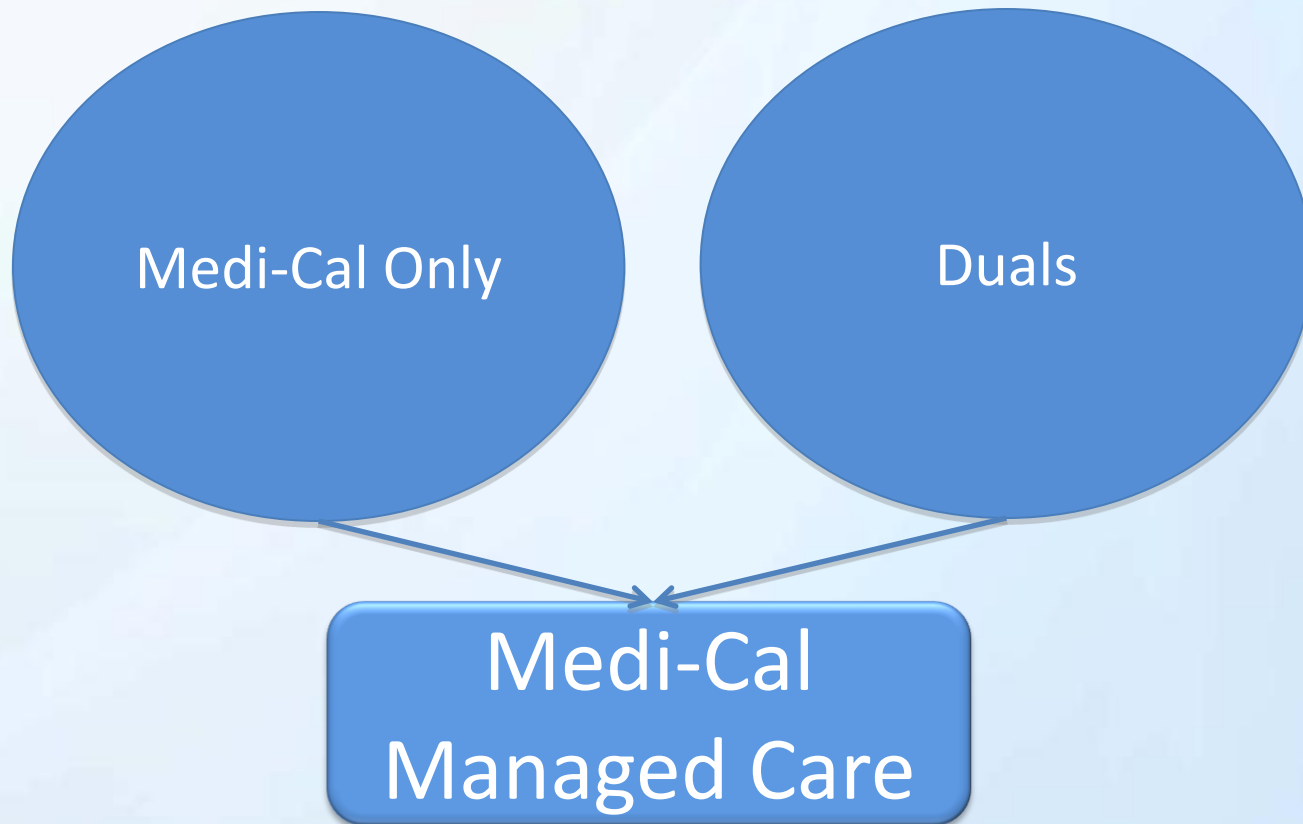


What



Medi-Cal managed care is mandatory

Even if a Dual Opt's Out of Cal MediConnect, must still enroll in Medi-Cal MC



Medicare Advantage Passive Enrollment in 2015

Who

**DUALS ENROLLED IN MEDICARE
ADVANTAGE (including D-SNP, C-
SNP) ARE NOT SUBJECT TO PASSIVE
ENROLLMENT IN
CAL MEDICONNECT IN 2014**

MUST STILL ENROLL IN MEDI-CAL MANAGED CARE

Cal MediConnect Benefits

Plans Required to Provide

- Medicare A, B, D
- Medi-Cal services including
 - LTSS: IHSS, CBAS, SNF, MSSP
- Vision and Transportation
- Care Coordination

Care Plan Option Services

- HCBS-like waiver services
- Extra IHSS-like services

Provided Outside of Plan

- Specialty mental health services not covered by Medicare
- Behavioral health Drug Medi-Cal benefits
- Dental (May 2014)

CCI will be implemented in 8 counties

Where



Alameda
Los Angeles
Orange
Riverside
San Bernardino
San Diego
San Mateo
Santa Clara

Different Cal MediConnect plans available in each county

Where

County	Plan(s)
Alameda	Alameda Alliance for Health Anthem Blue Cross
<i>Orange*</i>	<i>Cal Optima</i>
San Mateo	Health Plan of San Mateo
Riverside & San Bernardino	Inland Empire Health Plan Molina Health Care
Santa Clara	Anthem Blue Cross Santa Clara Family Health Plan
San Diego	Community Health Group Care 1 st Health Net Molina

Los Angeles County

CHANGE

LOS ANGELES

Primary Plan(s)
LA Care
Health Net
CareMore (Anthem Blue Cross)
Care1st
Molina

Orange County Update

ORANGE COUNTY DELAYED

- **Medicare Audit resulted in sanctions**
- **CalOptima not permitted to enroll new Medicare beneficiaries until Medicare approves**
- **DHCS and DMCH conducting audit of Medi-Cal operations**

Timelines vary by County, Change and Population

When

County

Dual or SPD

Cal
MediConnect
Eligible

In Medi-Cal
Managed Care

In a MA Plan
or Reassigned
to Part D 2014

MSSP
Beneficiary

Timelines vary by County:

Riverside, San Bernardino, San Diego

When

Who		When	How
Dual Cal MediConnect Eligible	In Medi-Cal Managed Care	May 1	In one month
	Not in Medi-Cal Managed Care	May 1*	By birth month
	MSSP Beneficiary	July 1	In one month
Dual Not Cal MediConnect Eligible or in MA Plan/Part D Reassigned*	In Medi-Cal Managed Care	April 1	Benefit Added
	Not in Medi-Cal Managed Care	May 1*	By birth month
	MSSP Beneficiary	July 1	In one month
SPD/Partial Dual	In Medi-Cal Managed Care	July 1	Benefit Added
	Not in Medi-Cal Managed Care	July 1	By birth month
	MSSP	July 1	In one month

*Those in an MA Plan or Part D reassigned subject to passive enrollment into Cal MediConnect on 1/1/15

Most beneficiaries will receive three notices

When



90 Day

- Informational Notice

60 Day

- Notice with Default Plan
- Cal MediConnect Guidebook (Choice Booklet and Choice Form Included)
- Provider Directory




30 Day


- Final Reminder Notice

90-Day Cal MediConnect Notice

State of California

Health and Human Services





JOHN SAMPLE
1234 SAMPLE STREET
ADDRESS 2
ANYTOWN CA 90000

XX/XX/XXXX

Important Information

You are getting this letter because you have **BOTH** Medicare and Medi-Cal. The way you get your health care is changing. You will now have more choices to meet your health care needs.


What is a Cal MediConnect plan?

A Cal MediConnect plan is a Medicare/Medi-Cal plan that will manage your Medicare and Medi-Cal benefits. Enrolling in a Cal MediConnect plan means that you keep your Medicare and Medi-Cal benefits with no extra cost but you must use your Cal MediConnect providers. You can also get additional transportation and vision benefits.

What are my plan choices?

You will get more information about your health plan choices soon. You may choose a Cal MediConnect plan, or choose to stay with regular Medicare. If you choose to stay with regular Medicare, you must choose a Medi-Cal health plan for your Medi-Cal benefits. If you do not make a choice, we will choose one of the Cal MediConnect plans for you. You keep the benefits and services you have now, and the Cal MediConnect plan will work with your doctors and providers.

This is the first letter telling you about your new choices. You will get a second letter with more information about your choices soon. You may choose a Cal MediConnect plan in your county, or choose to stay with regular Medicare.



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Your choices are:

1. **Enroll in a Cal MediConnect plan.** These health plans cover both Medicare and Medi-Cal services. If you join a Cal MediConnect plan you will receive In-Home Supportive Services (IHSS), Multipurpose Senior Services Program (MSSP), Community-Based Adult Services (CBAS), and nursing home care through the Cal MediConnect plan. They also cover vision care and transportation. The Cal MediConnect plan will work with you, your doctors and providers to ensure you get the care you need.
2. **Enroll in the Program of All-Inclusive Care for the Elderly (PACE).** If you are 55 or older and need a higher level of care in order to live at home, you may be able to join PACE. PACE provides all Medicare and Medi-Cal benefits plus some extra services to help seniors who have chronic conditions live at home.
3. **Enroll in a Medi-Cal health plan only. Your Medicare will stay the way it is now.** If you join a Medi-Cal health plan you keep your Medicare doctors and hospitals, and you will receive your Medi-Cal benefits like In-Home Supportive Services (IHSS), Multipurpose Senior Services Program (MSSP), Community-Based Adult Services (CBAS), and nursing home care through the Medi-Cal health plan.

How does a Cal MediConnect plan help me?

A Cal MediConnect plan helps you because your Medicare and Medi-Cal benefits work together and work better for you.

Your doctors, pharmacists, IHSS, CBAS, MSSP, and other providers work together to care for you and coordinates who assists you in getting the care and services that you need. This is called "care coordination."

What should I do now?

- Talk about your choices with someone who knows about your health care needs, like your family, your doctors, or your local senior center and/or Independent Living Center.
- Watch your mail for a packet from Health Care Options in about one month.
- If you want to talk to a health insurance counselor about your choices, call the **California Health Insurance Counseling & Advocacy Program (HICAP) at 1-800-434-0222.**
- If you need this letter in another language or alternate format, like large print, audio, or Braille; or if you need help understanding this letter, please call:

Health Care Options
1-844-580-7272 • TTY: 1-800-430-7077
Monday - Friday, 8 am - 5 pm
www.HealthCareOptions.dhcs.ca.gov

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90-Day Medi-Cal Managed Care Notice



State of California — Health and Human Services
Department of Health Care Services
P.O. Box 989009, West Sacramento, CA 95798-9850



JOHN SAMPLE
1234 SAMPLE STREET
ADDRESS 2
ANYTOWN CA 90000

XX/XX/XXXX

Important Information

The way you get Medi-Cal services is changing. You **must** enroll in a Medi-Cal managed care health plan to receive Medi-Cal services. The reason for this change is to help bring your Medi-Cal services together in one place.

Please read this notice carefully. You do not need to do anything yet. We will send you more information and health plan enrollment materials in about one month. If you are in Medicare, this change does not affect your Medicare coverage or your ability to see your Medicare doctor.

What services will you get from your Medi-Cal health plan?

Your Medi-Cal health plan will coordinate all of your Medi-Cal covered services.

- If you are in Medicare, your Medi-Cal health plan will pay for certain Medicare cost-sharing, certain additional benefits (such as prescription drugs not covered by Medicare), some transportation, and certain Long Term Services and Supports.
- If you just have Medi-Cal, your Medi-Cal health plan will be responsible for all of your medical care, some transportation, and certain Long Term Services and Supports.

What are Medi-Cal Long Term Services and Supports?

- **In-Home Supportive Services (IHSS)** are personal care services for people who need help to live safely in their homes. If you currently get IHSS, you do not have to change your IHSS providers and you can still hire, fire, and manage your providers.
- **Community-Based Adult Services (CBAS)** is daytime health care at centers that provide nursing, therapy, activities and meals for people with certain chronic health conditions.



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- **Multipurpose Senior Services Program (MSSP)** provides social and health care coordination services for people age 65 and older. If you get MSSP, your health plan will work with your MSSP providers to better coordinate your care. If you currently get MSSP, you do not have to change your MSSP provider.
- **Nursing home care:** If you get care in a nursing home, your health plan will work with your doctor and nursing home to better coordinate your care. If you are currently in a nursing home, you do not have to change your nursing home.
- If you do not get these services now, your health plan can help you get them in the future, if you need them.

Can I see my Medicare doctors after I enroll in a Medi-Cal health plan?

Yes, if you have Medicare, your Medicare providers will not change.

Can I see my Medi-Cal doctors after I enroll in a Medi-Cal health plan?

If you have Medi-Cal only, you will need to check with your health plan to determine if your providers work with the health plan. Generally, you are able to see your current doctors for 12 months.

Enrolling in a Medi-Cal health plan:

- Does NOT change your Medicare services or benefits.
- Does NOT change your Medi-Cal eligibility or cost you extra.
- Does NOT cut any of your Medi-Cal services or benefits.

When do I need to enroll in a Medi-Cal health plan?

You will be receiving more information about your choices for a Medi-Cal health plan. If you do not make a choice, you will be enrolled in a Medi-Cal health plan starting MM/DD/YYYY.

What should I do now?

- Talk about your choices with someone who knows about your health care needs, like your family, friends, your doctors, or your local Long Term Services and Supports providers.
- Watch your mail for a packet from Health Care Options in about one month.

For help or more information

If you need this letter in another language or alternate format, like large print, audio, or Braille; or if you need help enrolling in a health plan please call:

Health Care Options

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Monday - Friday, 8 am - 5 pm
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DHCS stated goals of the CCI

Improve Access
to Care

Promote
Person-Centered
Planning

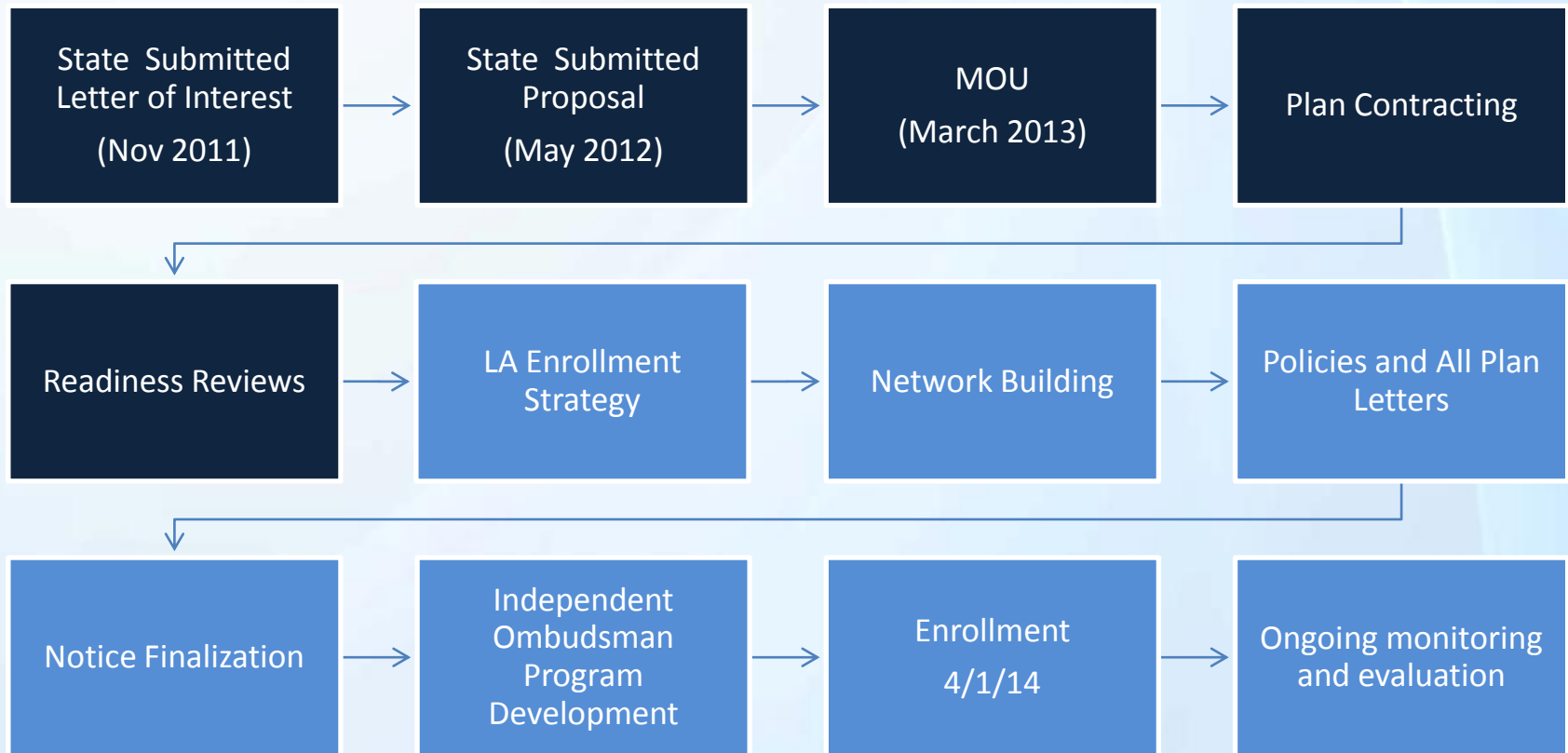
Promote
Independence in
Community

Right Care
Right Time
Right Place

Cost Savings for
State and Federal
Government

California is part way through a long process

Wrap Up



Should your client enroll in Cal MediConnect?

Wrap Up

Whether to enroll in Cal
MediConnect is an
individual choice

Factors to Consider in Making Decision to Enroll in Cal MediConnect

- Does plan have networks that include client's current medical providers?
- Does plan have strong relationship with social service providers?
- Does client have a course of treatment that should not be interrupted?
- How important are the additional benefits of vision and transportation to client?
- Will a plan improve your client's care coordination?

What to watch out for: good

Wrap Up

- Care Coordination
- One Card
- Additional required benefits
- Possible additional HCBS benefits
- Assessments/Care Plans

What to watch out for: caution

Wrap Up

- Timing
- Confusion/Mistakes
- Access to providers
- Disruption in care
- Other Issues

What can you do?

Wrap Up

- Influence program development
 - Stakeholder meetings
 - Talk to plan
 - Legislative advocacy
- Prepare to provide counsel
- Report problems

Local advocates can help individuals

Wrap Up

- HICAP
1-800-434-0222
- Health Consumer Alliance
www.healthconsumer.org/index.php?id=partners
- Disability Rights California
www.disabilityrightsca.org/

Want to know more?

- NSCLC Duals Website
 - Advocate's Guide
 - News
 - Sign up for alerts

<http://dualsdemoadvocacy.org>

 - Summary of three-way contracts: 2/14/14 11:00 a.m.
 - CCI Advanced Training: 2/18/14 11:00 a.m.
- Contact us:
 - Amber Cutler – acutler@nsclc.org
- Disability Rights Education & Defense Fund (DREDF)
 - www.dredf.org
- Department of Healthcare Services
 - www.calduals.org